

FEB 9 2005

Serial No. 10/603065
Attorney Docket No: 120-380

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| Transmittal x 2 | 2 pages |
| Response to RR | <u>9</u> pages |
| Change of Correspondence Address | 1 page |
| Petition for Ext. of Time x 2 | 2 pages |
| Total including this sheet | <u>18</u> <u>pages</u> |

PTO/SB/21 (09-04)

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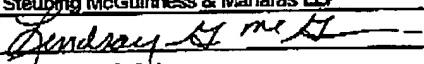
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| TRANSMITTAL FORM | | Application Number | 10/603065 |
| (to be used for all correspondence after initial filing) | | Filing Date | 06/24/2003 |
| | | First Named Inventor | Wang |
| | | Art Unit | 2828 |
| | | Examiner Name | Flores Ruiz |
| Total Number of Pages in This Submission | | Attorney Docket Number | 120-360 CORE-67 CON |

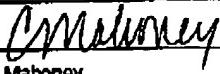
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| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / RR | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input checked="" type="checkbox"/> Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|--------|
| Firm Name | Steubing McGuiness & Manaras LLP | | |
| Signature |  | | |
| Printed name | Lindsay G. McGuiness | | |
| Date | 2/9/2005 | Reg. No. | 38,549 |

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| Typed or printed name | Carol Ann Mahoney | Date |

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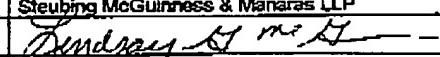
(to be used for all correspondence after initial filing)

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| | | First Named Inventor | Wang |
| | | Art Unit | 2828 |
| Total Number of Pages in This Submission | | Examiner Name | Flores Ruiz |
| | | Attorney Docket Number | 120-380 CORE-67 CON |

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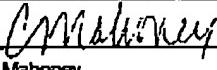
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| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | | | | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | | | | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Landscape Table on CD | | | | |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | | | | | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | |
| <table border="1"> <tr> <td>Remarks</td> <td colspan="2">PLEASE CHARGE ANY FEE DEFICIENCY, INCLUDING THE ISSUE FEE, OR CREDIT ANY OVERPAYMENT TO DEPOSIT ACCOUNT NO. 502569</td> </tr> </table> | | | Remarks | PLEASE CHARGE ANY FEE DEFICIENCY, INCLUDING THE ISSUE FEE, OR CREDIT ANY OVERPAYMENT TO DEPOSIT ACCOUNT NO. 502569 | |
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| | | | |
|--------------|---|----------|--------|
| Firm Name | Steubing McGuinness & Manaras LLP | | |
| Signature |  | | |
| Printed name | Lindsay G. McGuinness | | |
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|---|------------------------|---|--|-----|------------------|---|--------|-------|--|--------|--------|---|----------|--------|--|----------|--------|--|----------|----------|
| Application Number 10/603065 | | Filed 6/24/2003 | | | | | | | | | | | | | | | | | | |
| For Tunable Fabry-Perot Filter and Tunable Vertical Cavity Surface Emitting Laser | | | | | | | | | | | | | | | | | | | | |
| Art Unit 2828 | Examiner Flores | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1"> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$ 120</td> <td>\$ 60</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$ 450</td> <td>\$ 225</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$ 1,020</td> <td>\$ 510</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$ 1,590</td> <td>\$ 795</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$ 2,160</td> <td>\$ 1,080</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>502569</u>. I have enclosed a duplicate copy of this sheet.</p> | | | | Fee | Small Entity Fee | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 120 | \$ 60 | <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ 450 | \$ 225 | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 1,020 | \$ 510 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ 1,590 | \$ 795 | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ 2,160 | \$ 1,080 |
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 assignee of record of the entire interest. See 37 CFR 3.71.
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 attorney or agent of record. Registration Number 38549
 attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____.

Lindsay McGuiness
Signature

2/9/2005
Date

Lindsay McGuiness

Typed or printed name

978-264-6664

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38549</u> | | | |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | | |
| <u>Lindsay McGuiness</u> | | <u>2/9/2005</u> | |
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| <u>Lindsay McGuiness</u> | | 978-264-6664 | |
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